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			Issue: C
	POLICY ON HOSPITAL INFECTION CONTROL		Date: 06-01-2017
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PREPARED BY: Dy. Medical Superintendent		APPROVED BY: Chief Executive Officer	

1.0 Purpose:

To provide a program for surveillance, prevention and control of healthcare associated infection among the patients including out patients, inpatients, staff and visitors.

2.0 Scope:

Hospital wide

3.0 Definitions:


ICC: Infection Control Committee

ICT: Infection Control Team

4.0 Responsibilities:

The responsibility of Infection Control at Apollo Hospital, Secunderabad falls into the hands of the Infection Control Committee (ICC), whose primary duty is formulating and implementing policies to effectively manage infection control issues and outbreaks of infection.

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5.0 Procedure:

5.1 The ICC comprises of the Dy. Medical Superintendent (Dy. M.S), Physicians, Surgeons, Intensivist, Microbiologists, Nursing Supervisor, executive-House Keeping, Maintenance In-charge, Infection Control Nurse, OT In-charge nurse, Pharmacy Representative, Quality Team Incharge.

5.2 The objectives of the ICC:

- a. To advise and support the ICT
- b. To develop policies, procedures and guidelines pertaining to cleaning, disinfection and sanitation
- c. To provide guidelines concerning outbreak investigation, control of infectious diseases and isolate
- d. To develop policies for waste disposal and disposal of 'sharps'
- e. To maintain infection control in the Operating Theatre and other specific practice settings
- f. To ensure safe working conditions for Hospital staff and a safe environment for patients and visitors by laying down guidelines on Infection control and prevention.
- g. To recommend antibiotic policies and guidelines
- h. To ensure dissemination of information on infection control and conduct periodic training programmes for all healthcare workers.
- i. To assimilate surveillance data and keep the health care workers updated on changing trends in epidemiology.

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5.3 The Infection Control Team (ICT) is a small activity group, which is concerned with surveillance, prevention and control of infection in the hospital and which also provides day-to-day advice regarding infection related problems. The ICT shall be responsible for review of notifications of communicable diseases and nosocomial infections and recommended appropriate actions


5.4 Policies and procedures for surveillance, prevention and control of infection for patients, staff and visitors shall be incorporated in the infection control manual.

5.5 The infection control manual shall include the following chapters:

5.5.1 Infection control programme and policies: aim, objectives, infection control committee – role and constitution, infection control team – role and constitution, infection control officer – role, microbiologist – role, infection control nurse- role, role of nursing supervisor, role of hospital pharmacist, recruitment policies – as related to infection control, antimicrobial policy guidelines.

5.5.2 Infection control activities: environmental monitoring, monitoring of patients with infection, monitoring of disinfectants, sterile supply: bacteriological monitoring of sterilization – Autoclaves & ethylene oxide, Investigation of suspected outbreaks of infection, Screening of food handlers, Bacteriological analysis of Drinking water, and Bacteriological analysis of Dialysis water.

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5.5.3 Infection control practices: OT Cleaning, intravascular device usage and care, management of spills of body fluids, blood and microbiology cultures, management of needle-stick injury, accidental inoculation and percutaneous mucus membrane exposure to blood and body fluid substances, linen and laundry – guidelines, disinfectant policy, air conditioning of OT, ICU and other critical areas, food and beverages, mortuary and handling of cadavers, visitor's policy, care of patients with communicable diseases, isolation policy and procedures – barrier nursing.

Discarding and disposal of hospital waste: waste management policy and procedures.


5.6 Appropriate quality indicators shall be identified for surveillance of hospital-associated infection. Data shall be collected, aggregated and analyzed for infection risks and rates.

5.7 The infection rates shall be communicated to the physicians, nursing staff, management and external public health agencies as appropriate.

5.8 Staff shall be educated in preventing hospital-associated infection based on the analysis of the surveillance.

5.9 The infection rates shall be compared with similar units within the hospital and also with other hospitals with similar facilities.

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5.10 The ICC shall ensure that statutory provisions with regard to biomedical waste are adhered to.

5.11 Annexure: Infection Control manual

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